

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name City of San Jose		Date Received San Jose City Clerk 2018 NOV 26 PM 4:12	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Parks Recreation and neighborhood Services			
Designated Agency Contact (Name, Title) Tony Daly Food & Beverage manager		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number 408 794 6427	E-mail tony.daly@sanjoseca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ \$222/\$86

Event Description: Sharks VS. Wild Date(s) 11 / 06 / 18
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: San Jose Arena uthority - Shelly Wang
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Parks Recreation & Neighborhood Services/HHPZ	24	Recognition of collaborative exceptional work within the Parks Division.
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
See Attached List of Recipients.		Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Recognition of collaborative exceptional work within the Parks Division.
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (Include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: [Signature] Print Name: Justin Long Title: Deputy Director Date: 11/26/18
(month, day, year)
 Comment: _____

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Section 3.B.

<u>Name</u>	<u>Tickets</u>
Laura Alauger	1
Anthony Teschera	1
Shalanda Walker	1
Yadira Ibanez	1
Samantha Camacho	1
Kelly Walsh	1
Melissa Keo	1
AJ Wells	1
Joe Vaccaro	1
Salina Teas	1
Shannon Heimer	1
Amy Du	1
Justin Long	1
Tony Daly	1
Kiersten McCormick	1
Mario Day	1
Aileen Milich	1
Willie Martinez	1
Justin Immamra	1
Julio Serrano	1
Thomas Griffen	1